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CONFIRMATION NO. 1104

<b>SERIAL NUMBER</b> 10707,105	<b>FILING OR 371(c) DATE</b> 11/20/2003 <b>RULE</b>	<b>CLASS</b> 399	<b>GROUP ART UNIT</b> 2854	<b>ATTORNEY DOCKET NO.</b> KM-US030558	
<b>APPLICANTS</b> Hirokazu Yamamoto, Osaka, JAPAN; Keiji Okamura, Osaka, JAPAN; Makoto Ochi, Osaka, JAPAN; Yoshiteru Nishikawa, Osaka, JAPAN;					
<b>** CONTINUING DATA *****</b> NONE. N.Ha 2/12/07					
<b>** FOREIGN APPLICATIONS *****</b> None received. N.Ha 2/12/07 JAPAN 2002-338443 11/21/2002					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> ** 02/19/2004					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <u>N.Ha</u> Allowance Examiner's Signature Initials		<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 13	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> 22919					
<b>TITLE</b> Abnormality management device for an image forming device, abnormality management system, and program for the same					
<b>FILING FEE RECEIVED</b> 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		